Date: September 8, 1994

To: Nursing Homes NH 40
Hospitals HOSP 23

From: Judy Fryback, Director

Bureau of Quality Compliance

Subject: Revised Level I Screening Form/DOH-2192 (Rev. 6/94)/

Preadmission Screening Annual Resident Review Requirements (PASARR)

Attached is the revised Level I screening form DOH-2192 (Rev. 6/94) which will replace DOH-2192 (Rev. 11/93). THE CHANGES IN THIS FORM ARE TECHNICAL AND REPRESENT MINOR CHANGES IN LANGUAGE INTENDED TO CLARIFY COMPLETION REQUIREMENTS. THE REQUIRED USED OF THIS FORM HAS NOT CHANGED IN ANY WAY!

As there is a large supply of the old forms, orders will continue to be filled with those forms until the supply has been depleted.

For informational purposes, copies of the revised form are being sent to all hospitals.

To reiterate, this form is required under section 42 USC 1936r(b)(3)(F) and 1396r(e)(7) [Note: These sections also are referred to as 1919(b)(3)(F) and 1919(e)(7) of the Social Security Act].

Under these sections, Medicaid certified nursing facilities MUST NOT admit any new resident who is suspected of having a serious mental illness or a developmental disability unless the State mental health authority/State developmental disability authority or designee has evaluated the person and determined if the person needs nursing facility placement and if the person needs specialized services. 42 CFR 483.75(1)(5) requires the nursing facility to keep a copy of this form and the results of other preadmission screening(s) in the resident's clinical record.

Level I forms need to be complete in the following instances:

PREADMISSION: All individuals seeing admission to a nursing facility must receive a Level I Screen prior to admission.

CHANGE IN STATUS: For those individuals presently residing in a nursing home, this form should be filled out only if there is a change of status in Section A or B.

A Level I form DOES NOT need to be completed in regards to:

READMISSIONS. Individuals who are being readmitted to a Medicaid certified facility after a hospital stay of any type or of any length may be readmitted without completion of another Level I or Level II screen.

INTERFACILITY TRANSFERS: Residents who are transferred from one nursing facility to another, with or without an intervening hospital stay, are not subject to another Level I or Level II Screen. However, the transferring nursing facility is responsible for ensuring that any PASARR screening reports accompany the transferring resident, and for notifying the Area Screening Agency so that the resident's new location is known for future annual resident reviews.

The form is completed by checking the boxes in Section A, B and C following the instructions at the end of each section. Be sure to sign and date the form on the bottom of the front page when you are finished.

If you have additional questions, contact Jerome M. Cabala, CICSW, Social Services Consultant at (608) 266-8482.